



JUVENILE ADVISORY OF RIGHTS, PARENTAL NOTIFICATION and WAIVER FORM

SO/CR# _____ Place: _____ Date: _____
Name of Youth: _____ DOB: _____ Time Started: _____
Youth's Address: _____
Investigating Officer: _____ Badge Number: _____
Date of Offense: _____ Location of Offense: _____
Last Grade Completed in School: _____ Place of Birth: _____

Can you read and do you understand the English language? ☐ YES ☐ NO

I. Advisory of Rights: Before we ask you any questions, you must understand your rights:
(Check each box as the advisory is read to the Juvenile)

1. ☐ You have the right to remain silent. Anything you say can be used against you in court. Your right to remain silent cannot be used against you.
2. ☐ You have the right to speak to a lawyer for advice before we ask you any questions and to have your lawyer present with you during any questioning.
3. ☐ If you cannot afford a lawyer, one will be appointed to represent you before any questioning if you request one.
4. ☐ If you decide to answer questions now without a lawyer present, you will still have the right to stop answering questions and to stop us from questioning you further until you have spoken with a lawyer.
5. ☐ As a juvenile, your parents must be notified that you are being questioned and you have the right to have your parents present during any questioning.
6. ☐ If we cannot locate your parents, you have the right to have a relative, guardian or friend notified and they may be present during any questioning if you request it.
7. ☐ You have the right to refuse to incriminate yourself, meaning you have the right to make or refuse to make any statement or admission by speaking with us or in writing that would involve or incriminate you in this case or in any other investigation concerning violations of the criminal law.

DO YOU UNDERSTAND ALL OF THESE RIGHTS? ☐ YES ☐ NO

DO YOU HAVE ANY QUESTIONS ABOUT ANY OF THESE RIGHTS? ☐ YES ☐ NO

Having these rights in mind, do you wish to speak with me now? If you wish to speak with me, will you sign this waiver of your rights?

Date and Time of Advisory: _____

Advisory given by: _____ Badge # _____

I acknowledge that I have received a copy of this Rights Advisory and Waiver:

Signed: _____ Date: _____

II. Waiver of Rights (check one)

- ____ Youth is 16 years or older and voluntarily waived the rights identified in section I (complete section IV).
- ____ Youth is 16 years or older and refused to waive the rights identified in section I (no questioning may occur without counsel).
- ____ Youth is under age 16 and, after consultation with parent(s) or guardian(s), voluntarily waived the rights identified in section I (complete section V).
- ____ Youth is under age 16 and, after consultation with parent(s) or guardian(s), refused to waive the right identified in section I (no questioning may occur without counsel).

III. Notification Requirements: Irrespective of age, the youth's parents, guardian or legal custodian must be notified immediately that the youth is in custody, and the location of and reasons for the custody.

Contact Information: _____

Date/Time of Notification: _____

(If you are unable to contact a youth's parents or guardians, document each attempt)

IV. Waiver of Rights for Youths Age 16 or Older:

I have been advised of my right against self-incrimination, the right to counsel, and the right to parental notification. I understand those rights and voluntarily agree to waive those rights. I understand that my waiver of those rights means law enforcement can question me without the presence of counsel and without my parents or guardian present.

Signed: _____ Date: _____

V. Waiver of Rights for Youths Under Age 16

I have been advised of my right against self-incrimination, the right to counsel, and the right to parental notification. I have discussed these rights with my parent(s) or guardian(s) and we voluntarily agree to waive those rights. We understand that waiver of these rights means that law enforcement can question me without the presence of counsel.

Signed (youth): _____ Date: _____

Signed (parent/guardian): _____ Date: _____

Relationship: _____

Signed (Witness): _____ Date: _____ Time: _____